



Department of Police \* City of Chicago  
3510 South Michigan Avenue \* Chicago, Illinois 60653

Date 18Oct2011

Re: C. L. No. 1049278

Dear Kenry Jackson

A complaint against a Department member, registered under the above Complaint Log (C.L.) Number, is currently under investigation by the Chicago Police Department.

A vital step in the investigation is an interview with the person who registered the complaint as well as witnesses. This step is essential in order to conduct a complete and thorough investigation.

Please contact me as soon as possible so that I can make arrangements to meet with you regarding the incident under investigation. The following information is provided so that you can contact me without unnecessary inconvenience:

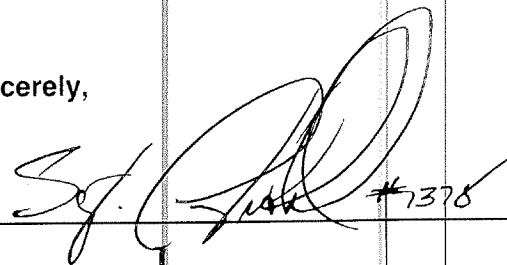
Name: Sgt. L. Skol

Address: 3510 S. Michigan Ave. Chicago, IL 60653

Telephone: (312)745-6310

Hours Available: 7am - 3pm

Sincerely,

  
#1378

CPD-44.223 (REV. 1/07)

Emergency: 9-1-1 \* Non-Emergency: (Within City limits) 3-1-1 \* Non-Emergency: (Outside City limits) 312-746-6000

TTY: 312-746-9715 \* E-mail: [police@ci.chi.il.us](mailto:police@ci.chi.il.us) \* Website: [www.ci.chi.il.us/CAPS](http://www.ci.chi.il.us/CAPS)

C.R.# 1049278  
ATTACHMENT #6

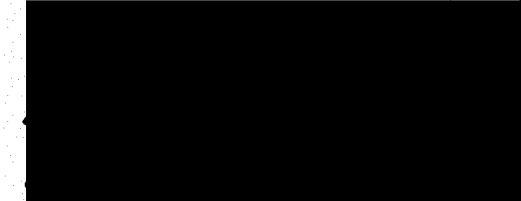
CPD 0018632

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:



2. Article Number  
(Transfer from service label)



**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Certified Mail    ☐ Express Mail  
☐ Registered    ☐ Return Receipt for Merchandise  
☐ Insured Mail    ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**Certified Mail**

- A mailing receipt
- A unique identifier
- A record of delivery

**Important Reminder**

- Certified Mail is
- **NO INSURANCE** for valuables, please

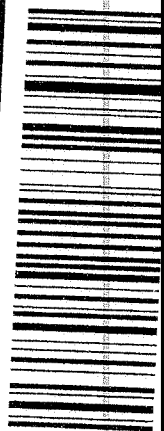
For an additional fee, obtain a delivery Receipt (PS Form 3811). Endorsement required.

- For an additional fee, obtain an addressee's endorsement "For Return Receipt"
- If a postmark on the mailpiece at the post office is not ne

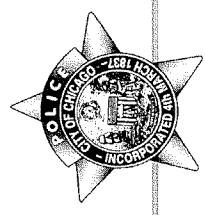
**IMPORTANT: Save**

PS Form 3800, August

**CERTIFIED MAIL™**



City of Chicago  
Department of Police  
3510 South Michigan Avenue  
Chicago, Illinois 60653 - 0001



BASEMENT

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

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**0.5K04-UNIT 121 USE**

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To [Redacted]  
Street, Apt. or PO Box [Redacted]  
City, State [Redacted]

PS Form 3811, June 2004 See Reverse for Instructions